SUPPLEMENT
TO THE
# BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, FEBRUARY 7TH, 1920.

## CONTENTS.

PAGE

**British Medical Association.**

CURRENT NOTES:
- THE ARBITRATION ... 29
- PRAISE AND BLAME FOR THE INSURANCE ACTS COMMITTEE ... 29
- ACKNOWLEDGEMENT OF ASSISTANCE ... 29
- THE MEDICAL PROFESSION AND LOCAL ELECTIONS ... 29

MEETINGS OF BRANCHES AND DIVISIONS ... 29

ASSOCIATION NOTICES:
- MEETING OF COUNCIL ... 30
- ELECTION OF REPRESENTATIVE BODY AND COUNCIL ... 30

INSURANCE—CORRESPONDENCE:
- THE DISPENSING FEE ... 30
- INSURANCE REMUNERATION ... 30
- INSURANCE MEDICAL RECORDS ... 31
- LIMITATION OF PANEL LISTS ... 31

ASSOCIATION INTELLIGENCE ... 31

NAVAL AND MILITARY APPOINTMENTS ... 32

APPOINTMENTS ... 32

DIARY OF SOCIETIES AND LECTURES ... 32

BIRTHS, MARRIAGES, AND DEATHS ... 32

# British Medical Association.

## CURRENT NOTES.

### The Arbitration.

IN preparing the case to be submitted to the Board of Arbitrators on behalf of insurance practitioners, the Insurance Acts Committee has secured the assistance of the distinguished economist, Professor A. L. Bowley, D.Sc., F.S.S. Dr. Bowley is professor of statistics in the University of London, and has been for many years lecturer at the London School of Economics and Political Science. He is a member of council of the Royal Economical Society, and has twice served as vice-president of the Royal Statistical Society. He has published many authoritative works on mathematics and statistics, as well as on economics and related social questions. Professor Bowley will advise on the economic and statistical questions involved, and will, if necessary, appear as a witness. The Insurance Acts Committee has entrusted the conduct of the case to Dr. H. B. Brackenbury, Dr. H. G. Dain, and Dr. A. Linnell, with the Medical Secretary. They will attend before the arbitrators and support the written case that will be submitted. The preparation of this is in the hands of the Executive Subcommittee, which consists of Drs. Brackenbury, Ridley Bailey, H. G. Cowie, Dain, Fothergill, Fry, Wood Locket, Palmer, Panting, Crawford Treasure, and J. P. Williams Freeman.

### Praise and Blame for the Insurance Acts Committee.

At its meeting on January 29th the Insurance Acts Committee received congratulations on its conduct of the negotiations with the Government with reference to the Regulations for 1920 and the capitation fee from a conference of the South-Western Group of Panel Committees (including Cornwall, Devonshire, Exeter, Plymouth, Somerset, Bath, Dorset, Isles of Scilly, and Wiltshire Committees); from Anglesey; from a conference of representatives of the North of England Panel Committees; from West Sussex; and from a conference of the Panel Committees of Lancashire. A typical resolution was that which came from the North of England Conference of Panel Committees:

> "That the heartiest thanks of this conference be sent to the Insurance Acts Committee for the way they have conducted the negotiations with the Ministry of Health on behalf of the medical profession."

The Committee expressed its satisfaction at receiving these marks of appreciation, but was preserved from the fate of those of whom all men speak well by the receipt of a resolution from the Southampton Panel Committee, which, on January 19th, expressed the opinion that—

> "The lamentable weakness in subjecting the irreducible minimum of 13s. 6d. to arbitration, if not acceded to by the Government, thereby converting it into a reducible maximum, has completely sold the pass."

The Medical Secretary reported that he had drawn the attention of the Southampton Committee to the resolution of the Panel Conference, which authorized the Insurance Acts Committee to ask for arbitration in the event of the Government not offering the 13s. 6d., though Southampton had not agreed to it.

### Acknowledgement of Assistance.

The Medical Secretary desires to take this means of thanking the numerous correspondents who have sent information bearing on the forthcoming arbitration on the insurance capitation fee. The tabulation and classification of this information is a task of considerable magnitude, and the Medical Secretary hopes that correspondents who have had no direct acknowledgement will accept his thanks hereby tendered

### The Medical Profession and Local Elections.

An instance of what can be done in the way of promoting the candidature of suitable medical men for seats on local authorities is reported by Mr. A. M. Webber, the Secretary of the Nottingham Division. There was a by-election for a vacancy on the Nottingham City Council, and Dr. F. H. Jacob was induced to stand as a candidate, with the support of both the Conservative and Liberal parties. A letter signed by most of the medical practitioners in the ward was circulated stating briefly Dr. Jacob's qualifications as a councillor from the medical point of view and the reasons why more medical men should be placed on the council. The letter was also inserted in the principal local papers, and the election agent considers that it was an important factor in the contest. The result was that Dr. Jacob was returned by a majority of 1,288 over the Labour candidate, and while, no doubt, this result was due very largely to the personality of Dr. Jacob, who is a well known and highly respected consulting physician in Nottingham, the action taken by his colleagues seems well worthy of notice and also of imitation. Dr. Jacob is physician to the General Hospital, Nottingham, and a former Secretary of the Nottingham Division.

# Meetings of Branches and Divisions.

NORTH OF ENGLAND BRANCH: CLEVELAND DIVISION.

THE annual dinner of the Division was held in the Corporation Hotel, Middlesbrough, on January 29th, when fifty-one members and guests were present. The Chairman of the Division (Dr. A. BRYANS of Middlesbrough) occupied the chair, and was supported by the Mayor of Middlesbrough, the Coroner for Sunderland, the clerks to the Middlesbrough and North Riding of Yorks Insurance Committees, and other well known residents in the district. The toast of "The Cleveland Division" was proposed by Mr. JAMES WANDLESS, clerk to Middlesbrough Insurance Committee, and was replied to by the CHAIRMAN, who, in the course of his speech, strongly deprecated the attempt which was being made by other bodies of medical men to take over work which rightfully belonged to the British Medical Association.

DORSET AND WEST HANTS BRANCH: WEST DORSET DIVISION.

AT a meeting on January 31st it was decided to adopt the recommendation of the Council of the British Medical Association to increase medical fees by 50 per cent. over pre-war prices, it being always understood that the individual doctor will use his discretion when dealing with the individual patient.

SUFFOLK BRANCH: WEST SUFFOLK DIVISION.

AT a meeting of the West Suffolk Division on January 27th it was resolved that fees for private clubs and non-insured members of friendly societies be raised to 14s. for members over 16, and 7s. for members under 16. These fees conform to the new rates to be instituted by the Suffolk County Medical Club as from April 1st next.

The Honorary Secretary was instructed to urge upon medical men in the area the desirability of amalgamating their private clubs with the County Club, as it was only by such means that uniform rates could possibly be obtained. Several medical practitioners in West Suffolk have already taken this step and have found it a great advantage. The office of the Suffolk County Medical Club is at 45, Princes Street, Ipswich.

# Association Notices.

## MEETING OF COUNCIL.

THE next Meeting of Council will be held on Wednesday, February 18th, in the Council Room, 429, Strand, London, W.C. 2., at 10 a.m.

## ELECTION OF REPRESENTATIVE BODY OF THE ASSOCIATION, 1920–21.

*Constituencies in Representative Body.*

THE list of the provisional ***Home Constituencies*** for election of the Representative Body, 1920–21, appeared in the SUPPLEMENT of January 24th, page 21.

As intimated to all the ***Oversea bodies,*** the Council has made each Oversea Division and Division-Branch, possessing an Honorary Secretary and the necessary organization, an independent Constituency.

*Election of Representatives and Deputy-Representatives.*

The Representatives and Deputy-Representatives in the Representative Body must be elected not later than May 28th, and their names notified to the Medical Secretary not later than June 4th.

The Council draws special attention to the fact that it is entirely within the discretion of each Constituency to decide whether the election of its Representative(s) and Deputy-Representative(s) shall be carried out ***by General Meeting of the Constituency, or by postal vote.***

*Date of Annual Representative Meeting at Cambridge.*

The Annual Representative Meeting at Cambridge will begin on Friday, June 25th, at 10 a.m.

*Motions for the Annual Representative Meeting.*

***Notices of Motion*** by Divisions, Constituencies, or Branches for the consideration of the Annual Representative Meeting, proposing to make any addition to, or any amendment, alteration or repeal of any Regulation or By-law, or to make any new Regulation or By-law, or proposing material alteration of the policy of the Association in matters relating to the honour and interests of the profession or of the Association, must be published in the JOURNAL not later than April 24th, and for this purpose should be received by the Medical Secretary ***not later than April 10th.***

## ELECTION OF COUNCIL OF THE ASSOCIATION, 1920-21.

THE list of the Groups of Branches in the United Kingdom for election of twenty-four members of the Council, 1920–21, and ***Nomination Form***, appeared in the SUPPLEMENT of January 24th, page 22. Separate Nomination Forms will, if desired, be forwarded on application by Branches, Divisions, or Members.

The list of the Groups of ***Oversea Branches*** was published in the SUPPLEMENT of October 11th, 1919, p. 79.

## BRANCH AND DIVISION MEETINGS TO BE HELD.

ESSEX BRANCH: SOUTH-EAST ESSEX DIVISION.—Mr. E. C. Hughes, F.R.C.S. (Surgeon to Guy's Hospital), will deliver an address on Gall Stones, on Thursday, February 12th, at the Victoria Hospital, Southend-on-Sea.

# INSURANCE.

## CORRESPONDENCE.

*The Dispensing Fee.*

SIR,—Below is a comparison of prices, pre-war and present, of a dozen drugs and dressings chosen indiscriminately from amongst those in everyday use:

| | | Pre-war. s. d. | Present. s. d. |
|---|---|---|---|
| Acidi borici ... ... ... ... | per lb. | 0 6 | 1 4½ |
| Syrup. hypophosph. co. ... ... | ,, | 1 6 | 2 9 |
| Tinct. digitalis ... ... ... ... | ,, | 3 6 | 6 3 |
| Inf. gent. conc. ... ... ... ... | ,, | 1 6 | 2 7 |
| Potass. iodidi ... ... ... ... | ,, | 10 3 | 26 8 |
| Mist. expect. ... ... ... ... | ,, | 2 0 | 3 6 |
| Paraffinum molle flav. ... ... ... | ,, | 0 6½ | 1 6 |
| Sodii salicyl. ... ... ... ... | ,, | 1 11 | 5 0 |
| Morphin. hydrochlor. ... ... ... | per oz. | 9 0 | 23 0 |
| Quin. sulph. ... ... ... ... | ,, | 1 0 | 4 8 |
| Boric lint ... ... ... ... | per lb. | 1 6 | 3 4 |
| Bandages (2½ in.) ... ... ... | per doz. | 2 6 | 6 0 |

In addition dispensers' salaries have risen and the prospect of a substantial rise in cost, especially of dressings, is imminent.

The chemist is paid for all drugs at 1920 prices and receives payment for dispensing at a rate approaching 5d. per bottle with the likelihood of an early increase. Yet the doctor who dispenses for his panel patient is to be offered the old 1913 rate of pay—namely, 2s. a head a year. There seems little need to emphasize the obvious injustice of this offer.

For the doctor not possessed of private means there is but one course—cheaper drugs and smaller doses.

If the interest of the patient is of any consequence, either to the Ministry of Health or to the medical profession, it is imperative that the dispensing practitioner should be encouraged, by proper payment, to give suitable medicines to his panel patients. He has the right to expect, moreover, a payment for his time and trouble at least equal to that received by the chemist.—I am, etc.,

Astley, Feb. 2nd. S. H. RYAN.

*Insurance Remuneration.*

SIR,—I have just received from my Insurance Committee the terms of service which come into operation on April 1st of this year. The Government has offered a capitation fee of 11s. The Conference representatives have refused this, and asked that the question of remuneration be submitted to arbitration. I do not find fault with Dr. Addison, who is a servant of the Government, in taking up the attitude he did at the Conference negotiations, because it is up to him, in order to please his master (the Government), to make the best terms possible with the profession short of granting their actual demands—namely, 13s. 6d. Also I have not the slightest doubt that the Government give us the credit of being able to look after our own interests, and the whole question to be settled, in their opinion, was to be done by haggling until they get us to accept something less than we at first asked for.

They certainly have not given us credit for asking (as we have done when we fixed upon 13s. 6d.) what we, the general practitioners, considered an irreducible minimum, much lower than the present increased cost of living justified us in doing. The increased cost of living is undoubtedly 100 per cent. over pre-war level, and we would have had a perfect and justifiable right in asking for 15s. The Government is perfectly aware of this increased cost, and Sir Eric Geddes in dealing with the railway workers found that he was negotiating with a very different type of man than those with whom Dr. Addison conferred as our representatives, because he was compelled to give them an increase equivalent to 134 per cent. over pre-war rates.

A great mistake was made when our representatives desired to submit the question to arbitration, and I do not think the profession should consider themselves bound by them. The Government cannot work the National Health Insurance scheme without the services of the medical profession, and if we in a solid body refuse to accept less than 13s. 6d. we are certain to obtain it, but we must act every one of us in concert.

We should not allow the Government to dictate to us and tell us what they will give us. It is for us to prevent them exploiting our services, and to state clearly we will accept nothing less than 13s. 6d., a 60 per cent. increase, which really is not enough and does not represent the full increase in cost of living, but as it is the figure fixed upon by our representatives, we are willing to abide by it.

Moreover, the new Regulations under which we shall work, and which come into force on April 1st next, are much more onerous and exacting than the old terms. For example, very briefly, the new Regulations state:

1. The panel doctor is responsible for the treatment of a pregnant woman up to the end of twenty-eight weeks, and again the tenth day following labour.
2. He has to keep and furnish reports; to consult with the Government medical officer; to meet him when he so desires; to visit cases in consultation with him; to show him all records and to answer any inquiries by letter if desired.
3. He must pay out of his own pocket for an anaesthetist if one is required.
4. He must obtain the consent of his Insurance Committee before he can take a holiday extending over one week, and before he can employ an assistant. He must obtain the consent of the Minister of Health before he can employ two or more assistants.
5. He must treat any member of any society that the Insurance Committee may direct him to treat.
6. He must supply drugs, etc., required for immediate application if the chemist is closed.
7. He, when declining to accept an applicant to his list, must treat him if he requires it, and then instruct him how to proceed to get upon a neighbour's panel.

These I quote as the most glaring and the most irksome of the new conditions under which we are to work in the future. Shall we be adequately paid if we accept 13s. 6d. per head per annum? I would unhesitatingly say "No," but as it is the figure fixed by our representatives I am willing to stand by it. The profession in one voice should request our representatives to withdraw their offer of arbitration, and let the Government understand at once that we can accept nothing less than 13s. 6d., and that no further negotiations are desired.

Why do we allow the Government to exploit our services? Is it because we have always done a very large amount of charitable work, and the Government now look upon it as a right? I am far from suggesting that we should discontinue to do charitable work, for I think there is nothing gives me greater pleasure than to return the fees in deserving cases, and the expressions of gratitude received are ample reward. But it is quite another thing for the Government to take advantage of this philanthropic trait of our character and ask us to work and render services of a very responsible nature for anything less than 13s. 6d. a head per annum. Any sum less than this will never give satisfaction, and the service will certainly suffer as a consequence. If you want the best service from anyone you should pay him well.

If we give this decision as our final and well considered ultimatum, and as coming as the voice of every *Division* and *Branch* of the *British Medical Association in England* I feel sure that the Government, recognizing the strong attitude we are taking up, and realizing that the insurance scheme cannot be carried on without our co-operation, and also after due consideration arriving at the fact that our demand for 13s. 6d. is equitable, fair and reasonable, they will, willingly I hope, and if unwilling be compelled to grant it.—I am, etc.,

THOMAS WRIGHT, M.B., C.M., D.P.H.

Greyholme, Aldershot, Jan. 28th.

*Insurance Medical Records.*

SIR,—Under the new Insurance Regulations record taking appears to be inevitable, and knowing as I do that the old method was cumbersome and unreliable from a statistical point of view, any suggestion likely to lead to ease, reliability, and usefulness should be welcomed by the powers that be, to say nothing of the record keeper.

It has been my custom ever since the Act came into force to paste a slip of paper inside the medical ticket, on which I record my attendance, particularly with regard to diagnosis and treatment, the name and address of patient being first entered. The patient is instructed to bring the card every time he wishes to see me, or to have the card on the table when I visit him at home. I find this a great convenience; it saves time and leads to accuracy in certification and continuity of treatment, and I am convinced that a big panel cannot be satisfactorily conducted without some such method.

If this system were adopted, the profession would quickly realize its value, and the State might then expect to get a true record, which I have no hesitation in saying was next door to impossible under the old arrangement. All that is required is a new medical ticket with a plain interior, or simply ruled as the old record cards were, and issued every year. The collection of these cards, simultaneously with the stamp cards, ought not to be difficult. I hardly like to suggest that the fact that a patient's card could be inspected at any time, either by his society's representative or State official, might afford an inducement to the adoption of the plan.

As instances of usefulness I may mention the case of a girl who sometime last December wanted a certificate, for the unemployment bureau, of inability to work from June to September, 1915. I was able to satisfy her requirement on referring to her medical card, without having to draw upon my stock of credulity or good nature. In another case a man died suddenly in a tramcar, three miles away from home; the police found in his pocket a medical card, with my notes attached, showing my last attendance and indicating the disease from which he died.

The method is businesslike, and I am convinced that any medical man who tries it will in future keep the record for his own benefit.—I am, etc.,

H. C. CREW.

Wednesbury, Jan. 28th.

*Limitation of Panel Lists.*

SIR,—The action taken by the Ministry of Health, at the twenty-fourth hour, in issuing a circular letter—and accidentally emphasizing it by another the day following—advocating the limitation of panels below the maximum laid down in the Regulations, is highly discreditable. I feel sure that at the Conference of Panel Committees none anticipated this, and to advise Insurance Committees to take action in this respect, when time was the main factor in hurrying the completion of the schemes, was most surely the best way of creating ill feeling and dissatisfaction.

"Give him an inch and he will take an ell" is an old saying, and this is the case with the Minister. The 3,000 limit is in the Regulations, but the future policy of the Ministry is that this is to be regarded as exceptional and far lower limits will be the rule.

In this county the Insurance Committee and the Panel Committee failed to agree upon a limit, and the matter was referred to the Minister, who has imposed a limit of 2,500 as a temporary measure, and it is added that such a limit cannot be regarded as an indication of the view of the Minister that so high a limit as 2,500 is appropriate for the rural parts of the area. (But no *rural* practitioner is ever likely to obtain this number locally.) The imposition of any limit does not in itself lead to greater efficiency, for the other duties of a practitioner must always be taken into consideration.

It seems illogical that, on the one hand, the Ministry recommends smaller panels, and then, under M.C. 3, we are advised to fine a practitioner who, for his own reasons, endeavours to limit his panel, and no points need be raised as to what other work he does.

In this county we endeavour to create a good standard

## British Medical Association.

*OFFICES AND LIBRARY, 429, STRAND, LONDON, W.C.2.*

### *Reference and Lending Library.*

THE READING ROOM, in which books of reference, periodicals, and standard works can be consulted, is open to members from 10 a.m. to 5 p.m., Saturdays 10 to 1.

LENDING LIBRARY: Members are entitled to borrow books, including current medical works; they will be forwarded, if desired, on an application to the Librarian, accompanied by 6d. for postage.

### *Departments.*

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate, Westrand, London. Tel.: Gerrard 2630).

MEDICAL SECRETARY (Telegrams: Medisecra, Westrand, London. Tel.: Gerrard 2634).

EDITOR, *British Medical Journal* (Telegrams: Aitiology, Westrand, London. Tel.: Gerrard 2631).

SCOTTISH MEDICAL SECRETARY: 6, Rutland Square, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 4361 Central.)

IRISH MEDICAL SECRETARY: 16, South Frederick Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 4737 Dublin.)

### *Diary of the Association.*

FEBRUARY.

6 Fri. London: Naval Medical Service Subcommittee, 2.30 p.m.
10 Tues. London: Executive Subcommittee, Insurance Acts Committee, 2.30 p.m.
11 Wed. London: Finance Committee, 2.30 p.m.
12 Thur. South-East Essex Division, Victoria Hospital, Southend-on-Sea. Address by Mr. E. C. Hughes, F.R.C.S. (Surgeon to Guy's Hospital), on Gall Stones.
18 Wed. London: **Council**, 10 a.m.
19 Thur. London: Dominions Committee, 2.30 p.m.
27 Fri. Edinburgh Branch: Address by Dr. A. Blackhall-Morison: The Passive Mechanical Factor in Heart Disease, Its Influence and Management.

of service, and would deal with any panel if it were proved that the practitioner was not able to undertake his obligations, but the creation of limits is really artificial and serves no useful purpose.—I am, etc.,

SIDNEY CLARKE, M.D.,

St. Albans, Feb. 3rd. Honorary Secretary, Herts Panel Committee

# Naval and Military Appointments.

## ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty:—Surgeon Commanders: H. C. Arathoon, E. B. Kenny, H. Spicer, and A. X. Lavertine to the *President*, additional, for recruiting duties at Manchester, Nottingham, Southampton, and Newcastle respectively; J. K. Raymond to the *Erin*. Surgeon Lieutenants: W. A. Jolliffe to the *Egmont*, additional; D. A. P. Clarke to the *Hercules*; W. J. McB. Allan to R.N. Hospital, Plymouth. Surgeon Lieutenants (temporary): W. O'G. Donoghue to the *Pembroke*, additional; H. S. Bryan to the *Victorious*.

## ARMY MEDICAL SERVICE.

Major-General W. T. Swan, C.B., retires on retired pay.

### ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel J. P. J. Murphy is placed on the half-pay list on account of ill health.

To be acting Lieutenant Colonels: Temporary Captain (acting Major) G. W. Rea (July 23rd, 1919), Major and Brevet Lieut.-Colonel B. A. Craig (August 20th, 1919).

Major A. B. Hinde, O.B.E. (ret. pay), is granted the rank of Lieutenant-Colonel on ceasing to be re-employed.

Major and Brevet Lieut.-Colonel D. S. Skelton, D.S.O., is seconded for service under the Colonial Office.

Major J. E. H. Gatt retires on retired pay.

Temporary Major S. A. Smith, D.S.O., O.B.E. (Major C.A.M.C.), relinquishes his temporary commission.

The following relinquish the acting rank of Major: Captains T. P. Litt, T. F. Kennedy, O.B.E., G. E. A. Argo, M.C., F. G. Flood, M.C., G. G. B. Holroyde, M.C., S. J. L. Lindeman, M.C., F. R. H. Mollan, M.C., H. W. Browne, M.C., S. J. A. H. Walshe, D.S.O., A. G. Wells, D.S.O., E. G. S. Cane, D.S.O., E. A. Strachan, W. J. Tobin. Temporary Captains: R. A. Steven, R. W. S. Christmas, V. L. Connolly, W. C. Horton, R. Thomson, C. C. Harrison, M.C., A. Brown, O.B.E., A. M. Malcolmson, A. E. Quine, W. D. Cruickshank, R. S. S. Statham, C. N. Coad, M.C., A. Scott, F. C. Lees, M.C., W. Montgomery, S. J. W. Donald, F. De S. McMenamin, M.C., H. W. Turner, M.C., S. E. Picken, M.C., H. B. G. Russell, R. B. Blair (April 6th, 1919, substituted for notification in the *London Gazette*, June 27th, 1919), B. H. Woodyatt, A. L. Robinson, H. H. Dunmere, M.C., W. C. Sharpe, A. S. K. Anderson, D.S.O., M.C., W. J. Macdonald, M.C.

Captain J. P. Quinn, M.C., resigns his commission.

The name of Captain James R. Hill is as now described, and not as printed in the *London Gazette* of October 14th, 1919.

The notifications in the *London Gazette* of November 4th, 1919, and the substitution therefor in the *London Gazette* of December 30th, 1919, regarding Lieut.-Colonel Charles J. O'Gorman, D.S.O., are cancelled.

Temporary Lieutenant S. P. Hyam to be temporary Captain.

To be acting Majors: Temporary Captains C. D. Coyle (from February 2nd to October 10th, 1919) and S. W. Allworthy (from February 28th to April 7th, 1919), R. Scott, E. J. Maxwell, Captain M. Morris.

Captain E. G. H. Cowen retires, receiving a gratuity.

Captains R. M. Dickson, O.B.E., and R. O'Kelly relinquish the acting rank of Lieutenant-Colonel.

Temporary Captain J. F. O'Malley to be temporary Major, June 1st, 1918 (substituted for notification in the *London Gazette*, May 31st, 1918).

The notifications in the *London Gazette* of January 24th, 1920, regarding the relinquishment of the acting rank of Major and the pay and allowances of that rank by temporary Captain Alexander Scott are cancelled.

The notifications in the *London Gazette* of August 25th and September 30th, 1919, regarding temporary Captain John D. Gimlette are cancelled.

Lieutenant (temporary Captain) H. J. Bensted, M.C., to be Captain.

T. W. J. Childs to be temporary Captain.

The following officers relinquish their commissions: Temporary Lieut.-Colonel A. C. Suffern on ceasing to serve with the 1st Birmingham War Hospital, and retains the rank of Lieutenant-Colonel. Temporary Major (acting Lieut.-Colonel) W. de M. Hill, C.B.E., and is granted the rank of Lieutenant-Colonel. Temporary Majors and retain the rank of Major: W. P. Yetts, O.B.E., Norcliffe Roberts, O.B.E. (on ceasing to serve with the Horton—County of London—War Hospital). Temporary Captains, and are granted the rank of Major: J. W. C. Gunn, W. J. Macdonald, M.C. (substituted for notification in the *London Gazette* of January 2nd, 1920). Temporary Captain J. Howells. Temporary Captains and retain the rank of Captain: G. M. Cameron, M.C., E. H. Cameron, J. R. Griffith, J. Geoghegan, B. M. Collard, T. E. George, S. B. Radley, A. C. Lambert, M.C., R. O. Whyte, A. E. Moore, J. D. Gimlette, E. Forbes, M.C., W. C. Morton, E. F. Buckler, R. Crawford, E. R. C. Cooke, M.C., J. Gray, R. L. Haines, K. D. Atteridge, D. I. Dakeyne, H. C. Martin, D. Rees, R. C. Walker, D. S. Clarke, H. W. Perkins, (acting Major) T. V. Somerville, M.C., G. J. C. Ferrier, M.C., R. H. Stoddard, G. A. Lamont, F. H. Cooke, J. F. Hoare, A. H. Huycke, M.C., F. T. D. Clindening, E. F. Wills, E. J. Peill, A. R. Leggatte, J. P. McVey, M.C., C. Hunter, F. D. Parbury, A. L. Martyn, A. H. Wilson, E. A. Aylward, D. K. MacDougall, A. G. Alexander, J. C. Anderson, G. N. Braham, M.C., C. Loddiges, M.C., A. F. Miller. Temporary Lieutenant F. G. McGuinniss, and retains the rank of Lieutenant (April 14th, 1919, substituted for notification in the *London Gazette*, July 9th, 1919). Temporary honorary Lieutenant C. H. Evans, and retains the honorary rank of Lieutenant.

## ROYAL AIR FORCE.

### MEDICAL BRANCH.

Transferred to unemployed list: Captains J. Paxton, J. H. M. Sandison. Lieutenant (acting Captain) C. Duggan, Lieutenant A. G. Hewer.

The initials of Captain C. S. Clegg are as now described, and not as stated in the *London Gazette* of April 4th, 1919.

Flight Lieutenant J. E. Dunbar (Captain R.A.M.C. T.F.) relinquishes his temporary R.A.F. commission on return to army duty.

Acting Squadron Leader J. J. C. Hamilton to be acting Wing Commander whilst Wing Commander.

Flight Lieutenant H. Gardiner-Hill, M.B.E., to be acting Squadron Leader whilst Squadron Leader.

## GENERAL RESERVE OF OFFICERS.

### ROYAL ARMY MEDICAL CORPS.

Captain F. E. Bissell (late Captain, R.A.M.C. S.R.) is granted the rank of Lieutenant-Colonel on ceasing to be employed.

## APPOINTMENTS.

NICCOL, William, M.B., Ch.B.Glasg., Ophthalmic Surgeon to the Gloucestershire Royal Infirmary and Eye Institution, Gloucester.

ROYAL FREE HOSPITAL, AND LONDON (ROYAL FREE HOSPITAL) SCHOOL OF MEDICINE FOR WOMEN.—George Scott Williamson, M.B., Ch.B.Edin., M.C., to be Pathologist and Director of Pathological Studies. Mary Schofield, M.R.C.S., L.R.C.P.Lond., to be Clinical Pathologist and Assistant Director of Pathological Studies.

DISTRICT MEDICAL OFFICERS.—R. Aitken, M.B., Ch.B. (Norwich Parish); R. M. Barrow, M.B. (St. Thomas Union); H. E. Coghlan, M.B. (Andover Union); P. S. Duigenan, L.R.C.P.Edin., L.R.C.S.I. (Ashton-under-Lyne Union); A. E. McKenzie, M.R.C.S., L.R.C.P. (Prescot Union); A. Mackintosh, M.B., Ch.B.Aberd., (Sunderland Union); F. L. Newton, M.B., Ch.B.Vict. (Upton-upon-Severn Union); J. H. Nixon, M.D. (Chippenham Union).

## DIARY OF SOCIETIES AND LECTURES.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, W.1.—Monday, 8.30 p.m., The Clinical or Naked Eye Diagnosis of Diphtheria and other Infections of the Fauces, illustrated with the Epidiascope by coloured drawings and photographs, by Dr. H. Drinkwater. On Some New Methods of Illustration, illustrated by the Epidiascope, by Dr. T. B. Hyslop.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—Hunterian Lectures: Monday, 5 p.m., Professor H. Tyrrell Gray: Influence of Nerve Impulses on Gastro-intestinal Disorders. Wednesday, 5 p.m., Professor James Sherren, C.B.E.: Late Results of the Surgical Treatment of Chronic Ulcers of the Stomach and Duodenum. Friday, 5 p.m., Professor Walter G. Spencer: Historical Relationship between Experiments on Animals and the Development of Surgery.

ROYAL SOCIETY OF MEDICINE.—Tuesday, Occasional Lecture, 5 p.m., Professor A. D. Waller: The Measurement of Human Emotion and of its Voluntary Control. *War Section:* Monday, 5.30 p.m., Discussion on Gas Poisoning, to be opened by Sir Wilmot Herringham. Colonel Cummins, Dr. C. G. Douglas, Professor J. S. Haldane and others will speak. *Section of Balneology and Climatology:* Thursday, 5.30 p.m., Resumed Discussion on the Merits and Defects of the British Health Resorts. Dr. F. G. Thomson, Dr. J. Campbell McClure, and Dr. W. P. Kennedy will speak. *Section of Neurology:* Thursday, 8.30 p.m., Dr. Rows, C.B.E.: Anxiety States. *Clinical Section:* Friday, 5 p.m., Cases.

## POST-GRADUATE COURSES AND LECTURES.

BROMPTON HOSPITAL FOR CONSUMPTION, S.W.—Wednesday, 4.30 p.m., Dr. Perkins: Ward Demonstrations.

FELLOWSHIP OF MEDICINE, 1, Wimpole Street, W.1.—Monday, noon, Dr. Eric Pritchard: Motor Functions of the Alimentary Tract in Infants. Tuesday, noon, Dr. F. Langmead: Congenital Pyloric Stenosis; 5 p.m., Dr. F. G. Crookshank: Handprints and Posture in Mongols. Wednesday, noon, Mr. W. M. Mollison: The Deaf Child. Thursday, noon, Dr. A. F. Hurst and Mr. Montagu Hopson: Medical Aspects of Dental Infection.

MANCHESTER: ANCOATS HOSPITAL.—Thursday, 4 p.m., Mr. Morley: Clinical Manifestations of the Mobile Caecum.

MANCHESTER ROYAL INFIRMARY.—Tuesday, 4.30 p.m., Mr. H. H. Rayner; Local Anaesthesia Technique (Practical Demonstration).

NEWCASTLE-ON-TYNE: ROYAL VICTORIA INFIRMARY.—Friday, 2.30 p.m., Dr. J. W. Smith: Post-Influenza Sequelae; 3.15 p.m., Professor W. E. Hume, C.M.G.: Clinical Aspect of Blood Diseases; 4.30 p.m. (College of Medicine), Professor Stuart McDonald: Morbid Anatomy of Blood Diseases.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.15.—Tuesday, 2 p.m., Mr. H. W. Carson: Hernia; 4.30 p.m., Dr. Arthur Giles: Gynaecological Fallacies.

SHEFFIELD ROYAL HOSPITAL.—Monday, 3.30 p.m., Dr. Nutt: X-ray Examination of Thorax. Tuesday, 4 p.m., Diseases of the Iris and Ciliary Body. Wednesday, 3.30 p.m., Dr. Wilkinson: Common Laryngeal Ailments. Thursday, 3.30 p.m., Dr. Skinner: Seborrhoea, Alopecia, etc. Friday, 4 p.m., Dr. Hay: Diseases of the Lens, Glaucoma.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith, W.—Saturday (February 7th), 10 a.m., Mr. Arthur Saunders: Medical Diseases of Children. Monday, 5 p.m., Mr. Addison: Appendicitis in Children. Tuesday, 5 p.m., Dr. Burnford: Clinical Lecture. Wednesday, 5 p.m., Mr. Owen: Pneumothorax. Thursday, 5 p.m., Dr. Simson: Uterine Fibroids. Friday, 4.30 p.m., Mr. Hey Groves: Bone Grafting in Fractures.

## BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is* **6s.**, *which sum should be forwarded with the notice not later than the first post on Wednesday morning in order to ensure insertion in the current issue.*

### BIRTH.

PINSON.—On January 30th, at 155, High Street, Chorlton-on-Medlock, Manchester, to the wife of K. B. Pinson, M.B., M.R.C.S., a son.

### DEATH.

HAYES.—On January 24th, 1920, after a short illness, at her residence, 3, Marlborough Buildings, Bath, Minnie Albinia Lennard Hayes, the beloved wife of Lieut.-Colonel E. C. Hayes, C.B.E., R.A.M.C. (retired).

Printed and published by the British Medical Association at their Office, No. 429, Strand, in the Parish of St. Martin-in-the-Fields, in the County of London.